

Michigan Department of Natural Resources - Forest, Mineral and Fire Management URBAN AND COMMUNITY FORESTRY PROGRAM

DTE ENERGY FOUNDATION TREE PLANTING PROGRAM GRANT APPLICATION



This information is required by Authority of Part 5 of Act 451, P.A, 1994, as amended, and the U.S. Cooperative Forestry Assistance Act of 1978, CDA 10.664, in order to be considered for a grant.

Applicant Name (county, city, township, village etc.)		Applicant's Contact Person (individual contact name)				
Address		E-mail				
City, State, ZIP		County				
Telephone		ype of Applicant (Please check one): Non-profit org.				
PROJECT BUDGET GRANT AMOUNT REQUESTED (DTE)		Local Unit of Gov't Other (specify)				
(no more than 50% of total project cost) \$_ MATCH AMOUNT (NON-DTE)		lumber (FEIN): (required info.): stimated project starting date:				
(must be at least 50% of total project cost) \$_ TOTAL PROJECT COST: \$	E	stimated projected completion date: nust be completed by 12/31/2006)				
		ST NAMES OF:				
PROJECT IS LOCATED WITHIN (CHECK ALL THAT APPLY):		S. Congressional Representative				
☐ Detroit Edison service territory.		Michigan State Senator				
☐ Michigan Consolidated Gas service territory.		Michigan State Representative				
B. Purpose of project (i.e., describe need):						
C. PROJECT GOALS/OBJECTIVES:						
D. LIST ANY COMMUNITY PARTNERS/VOLUNTEER GROUPS ASSOCIATED WITH THIS PROJECT:						
E. What are the short- and long-term benefits to the community?						
F. WHO WILL BE INVOLVED WITH AND RESPONSIBLE FOR	THE DRO LECT?					
1. VVIII DE INVOLVED WITH AND RESPONSIBLE FOR THE PROJECT !						

must specify total p than 50% of the to Matching funds ma contributions includ- as: adults at \$16.5	roject costs, grant amount tal project costs. Budgets ay not be federal monies e in-house or volunteer labe 50/hour, youths up to age	requested and matching funds must identify match funds and must be directly relator costs, goods and services 16 at \$8.25/hour. Profess	Information IC-4028, page 3). Budget detail ads. Grant amount request can be no more (cash, value of in-kind contributions etc.). ated to the tree planting project. In-kind. Volunteer labor/services should be valued sional or technical services contributed by set that are reasonable and customary.			
Project title:						
Expenses	Total Project Cost					
Personnel/Fringes	(= : =)	(200120111211212)				
Trees						
Misc. supplies						
Volunteer						
Contracted						
Equipment						
Other						
TOTAL						
 Tree Maintenance (Year One only) Program Administration (up to 20% of requested grant funds) Tree Installation/Planting (in-house, volunteer labor or contract labor) TREE PLANTING INFORMATION- Please answer the following questions and attach additional/separate pages as needed: A. Number of trees to be planted: 						
B. Size: (i.e., CALIPER)						
C. Tree Planting Stock Type: (i.e. balled & burlapped, container, bare root, seedlings)						
D. TREE SPECIES TO BE PLANTED: (Applicants are strongly encouraged to use a diverse variety of tree species in their planting project.)						
E. LOCATION OF TREE PLANTING (SITE MAP) AND TREE PLANTING DIAGRAM: (please attach both)						
STREET RIGHT-OF-WAY PARK/NATURE CENTER CAMPUS OTHER PUBLIC AREA						
F. HOW ARE OVERHEAD AND UNDERGROUND UTILITIES TAKEN INTO CONSIDERATION WHEN TREE PLANTING?						

BUDGET INFORMATION:

Call MISS DIG at (800) 482-7171 when planning any tree planting or digging project.

TREE MAINTENANCE PLAN:			
All planting projects must include a three (3) control/management, insect and disease m (IC 4108-1) may be used as a guideline. Pl who will be responsible for these activities (i.e.	monitoring and other routi lease visit http://www.mi.gg	ine and corrective actions. The ov/dnrucf to download a copy of	ne Tree Maintenance Guidelines
Identify the legal authority, responsible departn this project.	nent, board, committee or	commission charged with the car	rying out and administration of
Non-profit organizations: Copy of IRS of	determination indicating	 non-profit status enclosed?	Yes □No
	•	ner/municipality where planting proje	
∐Yes ∐NoL	Yes (Please attach)	NO If NO, a copy must be prov	vided before beginning project.
I hereby agree, as Designated Repres Application and to abide by the provi- compliance with all applicable federal a	isions of the DTE Ene	ergy Foundation Tree Plantir	
Applicant Signature		Date	
APPLICATION	S MUST BE <u>RECEIV</u>	<u>ED</u> BY DECEMBER 31,	
		IALS IN FOLDERS OR BINDER	
Return completed <i>Application</i> (original <u>Mailing Address:</u>		es) to: Street Address:	
DTE ENERGY FOUNDATION TREE PLANTING GRANTS FOREST, MINERAL AND FIRE MANAGEMENT MICHIGAN DEPARTMENT OF NATURAL RESOURCES PO BOX 30452		DTE ENERGY FOUNDARIES GRANTS FOREST, MINERAL AND FI MICHIGAN DEPARTMENT	

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